

U.S. Fish and Wildlife Service  
Southeast Region

**SUPPLEMENTAL INFORMATION**  
**Federal Career Intern Program**

Name (*last, first, middle*) \_\_\_\_\_

Home Phone \_\_\_\_\_

Work/Cell Phone \_\_\_\_\_

E-mail \_\_\_\_\_

**Career Intern Programs** (*Please check all fields of interest*)

- |  |  |  |
|--|--|--|
| <input type="checkbox"/> Fishery and Wildlife Biology        | <input type="checkbox"/> General Biology             | <input type="checkbox"/> Engineering           |
| <input type="checkbox"/> Forestry                            | <input type="checkbox"/> Outdoor Recreation Planning | <input type="checkbox"/> External Affairs      |
| <input type="checkbox"/> National Wildlife Refuge Management | <input type="checkbox"/> Refuge Law Enforcement      | <input type="checkbox"/> Public Administration |

Veterans Preference ☐ none ☐ 5-point ☐ 10-point disability ☐ 10-point compensable  
☐ 10-point other ☐ 10-point compensable/30 percent

(*Attach DD214 and/or Application for 10-Point Veteran's Preference (SF15), and Department of Defense or Department of Veterans Affairs documentation as appropriate*)

School \_\_\_\_\_

Grade Point Average \_\_\_\_\_ (**if transcripts are needed, you will be notified**)

Date of Graduation \_\_\_\_\_ Major/Graduate Program \_\_\_\_\_

I certify that, to the best of my knowledge and belief, all of the information I have provided in this application is made in good faith. I consent to the release of information from schools, employers, and other individuals and organizations about my ability and fitness for Federal employment.

SIGNATURE \_\_\_\_\_ DATE \_\_\_\_\_

**Please Attach this Supplemental Information Form to your OF-612 or Resume.**

I am only interested in the following geographic locations. (Please check the locations where you wish to work.)

- |                                   |                                    |   |                                      |
|-----------------------------------|------------------------------------|---|--------------------------------------|
| <input type="checkbox"/> Alabama  | <input type="checkbox"/> Georgia   | <input type="checkbox"/> Mississippi    | <input type="checkbox"/> Puerto Rico |
| <input type="checkbox"/> Arkansas | <input type="checkbox"/> Kentucky  | <input type="checkbox"/> North Carolina | <input type="checkbox"/> Tennessee   |
| <input type="checkbox"/> Florida  | <input type="checkbox"/> Louisiana | <input type="checkbox"/> South Carolina |                                      |